



STATE OF TENNESSEE
Department of Commerce and Insurance
Board of Examiners for Land Surveyors
500 James Robertson Parkway
Nashville, TN 37243-1146
615-741-3611
Fax: 615-253-1692

<http://www.tn.gov/regboards/surveyors>

STATE BOARD OF VERIFICATION OF LICENSURE/VERIFICATION

(State)

The person whose name and address appear below has made application for licensure with the **Tennessee Board of Examiners for Land Surveyors** and states that he/she is licensed to practice land surveying in your state.

APPLICANT _____

ADDRESS _____

Please furnish the Tennessee board with the following information regarding the above named applicant.

LICENSE TYPE	LICENSE NUMBER	ISSUE DATE	VALID UNTIL
Land Surveyor Intern			
Professional Land Surveyor			

1. Written Examination	HOURS	RESULTS/SCORE	NCEES DATE OF EXAM
FS	_____	_____	_____
PS	_____	_____	_____
State/Other	_____	_____	_____

2. _____ FS accepted from _____

3. _____ PS accepted from _____

Has the above named person ever been disciplined by your Board or is disciplinary action pending? _____
If yes, please explain on reverse side.

Signed by _____

Title _____

Date _____

(BOARD SEAL)

If a fee is required, please notify the applicant, but do not delay the processing of this form.

STATE BOARD RESPONDING – Please mail the form directly to the Tennessee board office – **DO NOT** return to the applicant.